



PTO/SB/21 - MODIFIED  
09/2004

## TRANSMITTAL FORM

*to be used for all correspondence after initial filing*

213200.00017

\* plus ONE cited reference

Total number of pages in this submission including transmittal

22\*

Application Number 09/678,728

Filing Date 10/04/2000

First Named Inventor Yat-Tung LAM

Group Art Unit 2193

Examiner Name Tan V. Mai

Attorney Docket Number MP0042

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached - Credit Authorization <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <small>with PTO Form 1449 and 1 cited reference</small> <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <small>(for an Application)</small> <input checked="" type="checkbox"/> Drawing(s) REPLACEMENT SHEET - FIG. 2 <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <small>(Appeal Notice, Brief, Reply Brief)</small> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (identify below):
REMARKS		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name KATTEN MUCHIN ROSENMAN, LLP

Signature

Printed Name Andrew J. Bateman

Reg. No. 45,573

Date: 08/02/2005

### CERTIFICATE OF FACSIMILE TRANSMISSION OR MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO via fax no. (703) 872-9306 or is being deposited with the US Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature		
Typed or Printed Name		Date:



# FEET TRANSMITTAL for FY 2005

Effective 10/01/2005. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 180.00)

## Complete if Known

Application Number	09/678,728
Filing Date	10/04/2000
First Named Inventor	Yat-Tung LAM
Examiner Name	Tran V. Mai
Art Unit	2193
Attorney Docket No.	MP0042

## METHOD OF PAYMENT (check all that apply)

Check  Credit card  Money Order  Other  None

 Deposit Account:Deposit Account **50-1710**Account Name **KATTEN MUCHIN ZAVIS ROSENMAN**

## The Director is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge above Deposit Account with any additional fees necessary UNDER 37 CFR 1.16 AND/OR 1.17 to maintain pendency of this application.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Description	Fee Paid
1001 300	2001 150	Utility Filing Fee	[ ]
1111 500	2111 250	Utility Search Fee	[ ]
1311 200	2311 100	Patent Examination Fee	[ ]

SUBTOTAL (1) (\$ 0.00)

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee	Fee Paid
	- 20** = [ ] X [ ] = [ ]		
Independent	- 3** = [ ] X [ ] = [ ]		
Multiple Dependent			

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Description
1202 50	2202 25	Claims in excess of 20
1201 200	2201 100	Independent claims in excess of 3
1203 360	2203 180	Multiple dependent claim, if not paid
1204 200	2204 100	** Reissue independent claims over original patent
1205 50	2205 25	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0.00)

\*\* or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code \$	Fee Code \$	Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	[ ]
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	[ ]
1053 130	1053 130	Non-English specification	[ ]
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	[ ]
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	[ ]
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	[ ]
1251 120	2251 60	Extension for reply within first month	[ ]
1252 450	2252 225	Extension for reply within second month	[ ]
1253 1,020	2253 510	Extension for reply within third month	[ ]
1254 1,590	2254 795	Extension for reply within fourth month	[ ]
1255 2,160	2255 1,080	Extension for reply within fifth month	[ ]
1401 500	2401 250	Notice of Appeal	[ ]
1402 500	2402 250	Filing a brief in support of an appeal	[ ]
1403 1,000	2403 500	Request for oral hearing	[ ]
1451 1,510	1451 1,510	Petition to institute a public use proceeding	[ ]
1452 500	2452 250	Petition to revive - unavoidable (1.17(l))	[ ]
1453 1,500	2453 750	Petition to revive - unintentional (1.17(m))	[ ]
1501 1,400	2501 700	Utility issue fee (or reissue)	[ ]
1502 800	2502 400	Design issue fee	[ ]
1503 1,100	2503 550	Plant issue fee	[ ]
1460 130	1460 130	Petitions to the Director	[ ]
1807 50	1807 50	Processing fee - provisional app (1.17(q))	[ ]
1806 180	1806 180	Submission of Information Disclosure Stmt	180.00
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	[ ]
1809 790	2809 395	Filing a submission after final rejection (1.129(a))	[ ]
1814 130	2814 65	Statutory Disclaimer	[ ]
1801 790	2801 395	Request for Continued Examination (RCE)	[ ]
1802 900	1802 900	Req for expedited examination - Design App	[ ]
Other fee (specify) _____			

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 180.00)

## SUBMITTED BY

Name: Andrew J. Bateman

Registration No.: 45,573

Telephone: (202) 625-3547

Signature: Andrew J. Bateman

Date: 08/02/2005